## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

## STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received
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## **COVER PAGE**

NAME OF THE D. WAST	(7120)		
NAME OF FILER (LAST)	(FIRST) Alana	7019 PE	(MIDDLE) C 19 <b>Maric</b> 8
1. Office, Agency, or Court	Priorite	LUIUM	C 13 7 MAGA C 8
Agency Name (Do not use acronyms)		HENT O	2 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
, , , , , ,	Laency	HUMA	N GERO, NOTE
Natural Resources Division, Board, Department, District, if a	pplicable	Your Position	
Department of Conse	wation - DOGGR-	Inland - Engineerin	a Geologist
► If filing for multiple positions, list below			<del>)                                    </del>
7 <b>3</b>	To the state of th	, on y may	
Agency:		Position:	
2. Jurisdiction of Office (Check a	t least one box)		
<b>X</b> State		☐ Judge or Court Commissioner (Stat	ewide Jurisdiction)
Multi-County		County of	
☐ City of		Other	
3. Type of Statement (Check at led			
Annual: The period covered is Jan December 31, 2017.	uary 1, 2017, through	Leaving Office: Date Left (Check one)	<u> </u>
-or-	/, through	The period covered is January	1, 2017, through the date of
December 31, 2017.		leaving office.	, . , <b>.</b>
Assuming Office: Date assumed	11,30,2018	The period covered is/. the date of leaving office.	, through
Candidate: Date of Election	and office sought, if c	different than Part 1:	
4. Schedule Summary (must co	omplete) ► Total number of	pages including this cover pag	/e:
Schedules attached			
Schedule A-1 - Investments - s	chedule attached	chedule C - Income, Loans, & Business	Positions - schedule attached
Schedule A-2 - Investments – s		chedule D - Income - Gifts - schedule a	
Schedule B - Real Property - s	chedule attached S	chedule E - Income – Gifts – Travel Pay	ments - schedule attached
or-	ete on any cohodulo		
5. Verification	no on any sonedule		
MAILING ADDRESS STREET	CITY	STATE	ZIP CODE
(Business or Agency Address Recommended - Pul 4109 Abbott Dr.	olic Document) Bakers A	ield CA	93312
DAYTIME TELEPHONE NUMBER	<del>-</del>	MAIL ADDRESS	1000
(661) 32-6-6038	a	lana. Crown @ conser	vation. ca. gov
I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.			
I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.			
Date Signed 12/17/2018	Sigr	nature Hube	and the second s
(month, day, ye	ar)	(File the originally signed statem	ent with your filing official.)